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| ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) VOSS-0043 | |
|--|---|--|--|
| | In re Application of Andreas BERGMAN | N | |
| | Application Number | | Filed September 23, 2005 |
| | DETERMINATION OF A MIDREGIONAL PROADRENOMEDULLIN PARTIAL PEPTIDE IN BIOLOGICAL FLUIDS FOR DIAGNOSTIC PURPOSES, AND IMMUNOASSAYS FOR CARRYING OUT SUCH A For DETERMINATION | | |
| | Group Art Unit 1641 | Examiner Christine E. Fost | ter |
| This is a request under the provisio response in the above identified ap | |) to extend the pe | riod for filing a |
| The requested extension and appro- (check time period desired): | | y fee are as follov | vs |
| One month (37 CFR | t 1.17(a)(1)) | | \$ |
| ☐ Two months (37 CF | R 1.17(a)(2)) | | \$ |
| ∑ Three months (37 C) | FR 1.17(a)(3)) | | \$ <u>1,050.00</u> |
| ☐ Four months (37 CI | FR 1.17(a)(4)) | | \$ |
| Five months (37 CF Applicant claims small entified is reduced by one-half, and A check in the amount of the | ty status. See 37 CFR I the resulting fee is: \$ | ₹ 1.27. Therefore <u>525.00</u> . | \$, the fee amount shown above |
| Payment by credit card. | | | |
| The Commissioner has alr Deposit Account. | eady been authorized | to charge fees in | this application to a |
| The Commissioner is here credit any overpayment, to I have enclosed a duplication of the property amounts and the property an | Deposit Account Nun | ge any fees which nber <u>13-3402</u> . | may be required, or |
| assignee of record of t | he ent∤re interest. See | e 37 CFR 3.71 | |
| * | CFR 3.73(b) is enclose | | sB/96). |
| attorney or agent of re | | ou. (i oimi i oio | |
| attorney or agent unde | | | |
| | acting under 37 CFR 1.34(a). | ·· | |
| WARNING: Information on this be included on this form. Pro | s form may become povide credit card info | oublic. Credit ca ormation and aut | rd information should not thorization on PTO-2038. |
| September 29, 2008 | | /Anth | nony J. Zelano/ |
| Date | Signature | | |
| | | | ony J. Zelano or printed name |
| NOTE: Signatures of all the inventors or assign forms if more than one signature is required, se | ees of record of the entire int e below*. | terest or their represen | ntative(s) are required. Submit multiple |

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